Health Policy Framework

WHAT WE HEARD...

from Albertans during March 2006

Consultation Report
April 20, 2006

Alberta
Health and Wellness

Introduction

The Alberta Government announced the *Getting on with Better Health Care* package in July, 2005. This package contained 13 actions to improve the health care system. These actions include the priorities areas of access, continuing care, wellness, mental health, primary health care, children's health, pharmaceuticals, electronic health records and rural health. One of the actions included developing a *Health Policy Framework* to set the overall direction this government will take to protect the public health system.

The *Health Policy Framework* was released in February, 2006 with ten policy directions to improve the performance and sustainability of Alberta's health system.

Many Albertans have taken the time to express their views and offer their ideas on the *Health Policy Framework*.

Throughout the month of March, 2006, the Minister and staff of the department of Health and Wellness heard from individuals and stakeholder groups at meetings and through letters, e-mails, web-based feedback forms, and phone calls.

Policy Directions:

1. Putting patients at the centre
2. Promoting flexibility in scope of practice of health professionals
3. Implementing new compensation models
4. Strengthening inter-regional collaboration
5. Reshaping the role of hospitals
6. Establishing parameters for publicly funded health services
7. Creating long-term sustainability and flexible funding options
8. Expanding system capacity
9. Paying for choice and access while protecting the public system
10. Deriving economic benefits from health services and research

In this report...

We will share with you what we heard. We will tell you how we consulted, how many people we heard from, and what they had to say. We are using this information to help us develop actions to move forward with health system improvements.

How We Consulted

Stakeholder Meetings

- The Minister and department staff consulted in person with 420 health system stakeholders and interested Albertans during the month of March. The formal meeting schedule is attached (Appendix A). These meetings augmented the ongoing relationships with key health system stakeholders.

- These consultations included presentations by various groups and individuals, including seniors, health care professionals, unions, municipal leaders, educators and community organizations.

E-mails and Letters

- 4,056 Albertans responded to the Premier's request for input and shared their thoughts by writing letters and e-mails to the Premier, the Minister, their MLA, or to Alberta Connects.

- We heard from a wide diversity of people – people who described themselves as regular "Marthas" or "Henrys"; young people; seniors; professionals such as engineers, physicians, chiropractors, physiotherapists; CEOs of companies; stay-at-home moms; employees of our health care system; people who have worked in health care systems in other countries; and other interested citizens.

- Albertans are clearly staying on top of the issues and are well informed. Some cited specific research, provided web sites, reports and other relevant material.

- There were a few organized campaigns opposing the Framework, but the bulk of feedback we received was from individuals who had taken the time to share heartfelt thoughts in their own words. While most were e-mails, there were typed and handwritten letters as well.

Phone calls

- 2,018 Albertans contacted the Alberta Government through Service Alberta or through telephone calls to the minister's office and the Health and Wellness department.

- Some of these callers were requesting information while others expressed their opinions on the proposals.

On-Line Feedback

- 342 Albertans took advantage of the government's on-line consultation feedback questionnaire. This electronic tool allows for comments to be made easily on the whole or specific parts of the Health Policy Framework.

Total responses

- During the month of March, through the above mentioned avenues, the government heard from more than 6,800 Albertans on Alberta's proposed health policies.

- Appendix B provides a more specific breakdown of responses by channel of consultation.

How Albertans Responded

How we consulted made a difference in how Albertans responded.

Meetings

The stakeholder meetings allowed for dialogue about the whole Framework. It was clear that Albertans are engaged in the discussion and debate about improving Alberta's health care system. The dialogue at these meetings were mutually beneficial. Participants were given an opportunity to better understand the ideas in the Framework, while ministry staff were given an understanding of the directions people strongly support, directions not supported and the directions they are sceptical about, or want more information about, before they form an opinion.

Overall, many of the groups we met with were generally supportive of the Health Policy Framework. The specific directions that received mixed support or caused the most concern were the direction to "create long-term sustainability and flexible funding options" and "paying for choice and access while protecting the public system". People told us they need more details and want assurance that they will continue to have access to a strong public health care system.

E-mails, Phone calls, On-line feedback and Letters

When people contacted government using other than face-to-face methods, the exchange was primarily a one-way sharing of opinions and thoughts. While everyone received a response; these methods did not allow the opportunity to engage in a dialogue and exploration of ideas. It was clear from the responses that Albertans want to be engaged in the debate on health care reform. They would like more details, and strongly support further public dialogue and consultation.

Overall, we received four general types of response. The first type was from Albertans who reject the framework outright because they feel it represents a move toward what they describe as a "two-tier, American style system". A second type was from Albertans who have many concerns and questions and are not convinced that some of the directions, particularly "paying for choice" and "flexible funding options", would improve the system. The third group supported parts of the framework but did not support private insurance and doctors working in both systems. The fourth type was from Albertans who supported the Framework.

What We Heard About...

There were common views expressed most often in our consultations, regardless of which method of communication was used. . By "many Albertans" we mean the comments that came up most predominantly in what we heard. By "some Albertans", we mean the comments that emerged often but were not as predominant as the others.

1. Putting patients at the centre

- People generally feel that patients and their families should be active decision makers in matters affecting their health.

- Some Albertans encourage us to increase our efforts on wellness and prevention of ill health, starting with children in school.

2. Promoting flexibility in scope of practice of health professionals

- There is overall support for making better use of health professionals such as nurses, pharmacists and others. Some told us they would be willing to see other health professionals for everyday health care needs so the doctor can focus on people with more complex needs.

"I would have no problem seeing a Nurse Practitioner for most medical needs as this would free up Physicians to spend more quality time with their patients."

- People generally agree that team-based care is more comprehensive and better suited to meet the needs of patients. Some said that health providers need to learn to work in teams as part of their education and training.

- Health professionals such as nurses, physiotherapists, pharmacists, chiropractors and others told us they are prepared to participate in approaches that make the best use of their skills.

What We Heard About...

3. Implementing new compensation models

"I applaud the recent experiment with hip and knee replacement... streamlining costs and improving overall efficiency is a wonderful way to improve the delivery of health care."

- People generally like the idea of new compensation models that pay health professionals for results and health outcomes rather than a fee for services.
- Some suggest that financial incentives are important in motivating health care providers.
- Many Albertans encourage us to continue with innovations like the Alberta Hip and Knee Replacement project and Primary Care Networks. Many see these as good examples of how we can improve access in our current public health care system.

4. Strengthening inter-regional collaboration

- There was little feedback in the e-mails and letters on this direction. Those who commented on this direction at stakeholder meetings are generally supportive. Some said that this is already happening in their regions.

5. Reshaping the role of hospitals

- Not many Albertans who sent e-mails and letters commented on this direction. Those who commented on this direction at stakeholder meetings are generally supportive. Some have questions about how this would be done in practice and suggest it would require careful consideration.
- Some suggestions for how rural facilities could be better utilized included the provision of sub-acute care, community clinics, primary care centres, and select surgeries to take pressure off the urban centres.

What We Heard About...

6. Establishing parameters for publicly funded health services

"There does need to be some parameters for publicly funded health services ...determining which services are discretionary will be a constant challenge."

- Some Albertans agree that parameters need to be set for publicly funded services. They stressed that there would need to be a well developed process for making such decisions.

- Some Albertans are concerned about the potential loss of publicly funded services and benefits. People want to be reassured that this is not about "de-listing" services.

- Some Albertans are worried that a person's income level could be a barrier to accessing services.

What We Heard About...

7. Creating long-term sustainability and flexible funding options

- Many of the stakeholder groups we met with support a pharmacare program and bulk purchasing of drugs.

- Some stakeholder groups are cautiously supportive of this direction, provided there are assurances that the public health care system and access to necessary care is not adversely affected.

- Many of the Albertans who sent letters and e-mails are strongly opposed to this direction. Their main fear is that new insurance-based funding models will create what many described as a "two-tier, Americanized style" of health care; one where those who can afford private insurance can access services more quickly.

"Increased privatization of healthcare would only erode the quality of the public sector, increase costs to both individuals and society, and increase the disparity of service between high and low income households."

- Many of these Albertans are worried that they will not be able to afford health insurance and that they will not be covered because of their age or pre-existing conditions.

- Some Albertans have interpreted the intent of this policy as private insurance applying to all health services when it was intended to consider insurance only to some services. Also, Albertans would continue to have access to services they require.

- Many also believe that private insurance will increase costs to the health care system and increase the health benefits costs of employers. Some suggested Alberta has a business advantage over the United States because health care costs to employers are lower here.

What We Heard About...

8. Expanding system capacity

"The just announced increase in residency seats for foreign trained doctors is a step in the right direction."

- People generally support training more health professionals, and accrediting and fast-tracking foreign health professionals.
- Some are concerned that there are not enough clinical placements for students.
- Some Albertans are concerned about expanding system capacity through private delivery based on the belief that the same services delivered in private facilities cost more.
- Many are concerned that with the serious shortage of health care professionals today, it would be even worse if these professionals were divided between private and public sectors. Rural communities are particularly concerned because they have difficulty attracting health professionals in the current system.

What We Heard About...

9. Paying for choice and access while protecting the public system

- Some stakeholder groups were cautiously supportive of this direction but wanted more details and information on safeguards to protect the public system and guard against the loss of health professionals from the public system. They also wanted to know how they could become more involved in the planning process.

- Many Albertans are opposed to what they see as a move toward "privatization" of the health care system. They express concerns that this will benefit the wealthy but pose serious challenges to low income individuals, disabled, seniors, and families.

- Many Albertans believe that private options would increase wait times in the public system and increase costs to individuals and to the system. This raises concerns about general access and response to peoples' urgent needs in the public system, despite assurances that Albertans will never be denied the care that they need.

- Many Albertans strongly oppose this direction. They do not want doctors working in both private and public systems because they believe it enables "queue jumping" and creates an incentive for doctors to direct patients to private services. Other Albertans see this policy direction as offering expanded access because it keeps doctors working in the public system before they can do private pay services.

- Some have no objection to doctors working in a private system if they are required to opt out of the public system and provided that taxpayer dollars in no way subsidize the private system.

- Some Albertans suggest that those who can afford it can continue to pay for choice and access in the United States, as they do now.

What We Heard About...

10. Deriving economic benefits from health services and research

- Most Albertans who sent e-mails and letters did not comment on this direction, but the stakeholder groups are generally supportive.

- Of those who commented, some expressed concern about research being directed and conducted by the private sector, particularly pharmaceutical companies.

- Many of the stakeholder groups we met with are supportive of trying and evaluating innovative ideas and see research as key to such innovation.

Other themes

Underlying these points-of-view on the specific policy directions, other themes emerged in what we heard from Albertans.

- Many Albertans told us to better manage the current system and focus on continuing health system improvements. Some mentioned Primary Care Networks, the Electronic Health Record and the Physician Office Systems Program as examples of good programs to support health system improvements.

"Please remember that health care, people care and education are your core businesses and should consume the bulk of the budget!"

- Many Albertans expressed strong beliefs about the importance of ensuring that disadvantaged groups, such as seniors and the poor, have the same access to care as everyone else.

- Many of the stakeholder groups that met with the Minister support the view that the system needs to change. However, some Albertans who sent e-mails and letters are sceptical about the sustainability argument. They do not believe that health care costs are out of control given Alberta's changing demographics and proportion of health spending related to Gross Domestic Product. Others agree that the system needs to change.

What We Heard About...

Other themes

"It is quite difficult to get a sense of it all. I am just an ordinary Albertan who feels powerless."

- Many Albertans are upset at the lack of public meetings and the short time period given to consider the Framework and provide their feedback. Many feel the consultation was inadequate for such an important issue.

- Some Albertans have reservations about parts of the Framework and would like more details to better understand the proposals.

- Many Albertans expressed the view that universal public health care is a right, not a commodity. They strongly support the *Canada Health Act* and worry that increased privatization will not uphold the principles of the *Canada Health Act*.

- Many who are worried about privatization of the health care system compare it with energy deregulation, which they say has increased costs to consumers.

- Some Albertans are aware of issues in or have had experience with health care systems in other countries such as the United Kingdom, New Zealand and the United States, and gave examples of how privatization of health care and private insurance do not work.

- Some people suggested that we are now paying for the cutbacks of the 1990s and gave examples of hospitals being "blown up" or closed.

- Some Albertans told us they are worried about how the Framework will affect Alberta. A particular concern is the North American Free Trade Agreement implications of opening the health system to private competition.

At This Point...

From the input we heard, Albertans support putting patients first, making better use of the skills of health professionals and new compensation models. Most Albertans said they are strongly opposed to doctors being allowed to work in private and public systems. They also told us they are strongly opposed to private insurance that will allow those who can afford it quicker access to services.

Many Albertans urge us to make improvements to the public system before considering ideas that introduce more access to private services and private insurance. Some Albertans are prepared to consider flexible funding options and paying for choice provided there is more detail on how this would work and with assurances that Albertans will continue to have access to a strong public health care system.

Albertans would like more information and communication about Alberta's policy directions to better understand the Framework and what it will mean for them.

It is clear that our health care system is very important to Albertans.

Alberta Health and Wellness thanks the thousands of Albertans who took the time to review the Health Policy Framework and provide their input which will be carefully considered and valued as we move forward in strengthening our province's health care system.

Appendix A

Stakeholder Meeting Schedule

March

6th **Edmonton**

- Health Quality Council of Alberta
- College of Physical Therapists of Alberta
- Athabasca University
- Lethbridge Community College

8th **Edmonton**

- Members of the Public
- Health Sciences Association of Alberta
- Alberta Medical Association
- Bow Valley College, Calgary
- Mount Royal College, Calgary

10th **Edmonton**

- Alberta College of Pharmacists
- College of Licensed Practical Nurses of Alberta

11th **Bonnyville**

- Bonnyville Health Centre Board
- Mayor of Bonnyville
- Mayor of Cold Lake
- Reeve of Bonnyville
- Cold Lake Citizens

St. Paul

- County of St. Paul
- Town of St. Paul
- Lakeland County
- St. Paul Senior Citizen's Club
- Town of Elk Point
- Alberta Council on Aging
- Societe de Bien-etre Centre Est (East Central Wellness Society)
- East Central Health Region
- St. Paul School Board
- Lakeland Seniors Games Committee
- Licensed Practical Nurses

13th **Edmonton**

- Members of the public

14th **Edmonton**

- College of Physicians and Surgeons of Alberta
- Capital Health Board Members
- Action for People with Neuropathic Pain

17th **Edmonton**

- University of Alberta Medical and Pharmacy Students
- Alberta Alliance Party
- FJS Rehabilitation Consulting
- Metis Settlement General Council

18th **Calgary (pm)**

- Seniors Groups
- Legion Members
- Community Associations
- Immigrant Associations

20th **Edmonton**

- Smart Care for Western Canadians Living with Chronic Obstructive Pulmonary Disease (COPD)
- Friends of Medicare
- College of Dental Technologists of Alberta

21st **Edmonton**

- Alberta Pro-Life
- Acupuncture Society of Alberta
- College and Association of Registered Nurses of Alberta
- Pfizer
- Alberta College of Family Physicians

22nd **Edmonton**

- Alberta College of Optometrists
- Alberta Association of Optometrists
- Alberta Council on Aging

23rd **Edmonton**

- Multiple Sclerosis (MS) Society
- Canada Research Based Pharmaceutical Co. (RX&D)
- Alberta Catholic Healthcare Corporation

24th **Sherwood Park**

- Seniors United Now (SUN)
- Seniors Groups
- Sherwood Park 55 Plus Club
- Liberal Organization
- Sun Life Financial/Canadian Federation for University Women

25th **Edmonton**

- Alberta Blue Cross
- Seniors I-Care, Hinton
- Best Medicine Coalition of Canada
- Alberta Liberals
- Alberta Committee for Citizens with Disabilities
- Alberta Pharmacists Association
- Alberta Bone and Joint Health Institute

27th Medicine Hat

- Palliser Health Region – Chiefs of Staff, Medicine Hat
- Chamber of Commerce, Medicine Hat
- Mayors, City of Medicine Hat, Town of Bow Island
- Health Sciences faculty– Medicine Hat College, Medicine Hat
- Nurses of Bow Island and Brooks
- United Nurses of Alberta Representative
- Chiropractor

Lethbridge

- Southern Alberta Self Help Association
- CDI Back Institute
- Extendicare
- St. Michael's Health Centre
- Chinook Primary Care Network
- Alberta Union of Provincial Employees
- United Nurses of Alberta
- Canadian Union of Public Employees
- Mayor of Picture Butte
- Mayor of Ft. Macleod
- University of Lethbridge
- Nord Bridge Seniors Centre
- Lethbridge Senior Citizens Organization

28th Edmonton

- Raging Grannies
- Alberta Urban Municipalities Association
- Alberta Federation of Labour
- University of Alberta Neurosugeon/SEARCH Canada
- Faculty of Nursing, University of Alberta
- United Nurses of Alberta
- Alberta Physiotherapy Association
- Members of the public

29th Edmonton

- Alberta Cancer Board
- College of Chiropractors
- Canadian Association of Chain Drug Stores
- Canadian Taxpayers Federation
- Professional Association of Residents of Alberta
- Canadian Victorian Order of Nurses
- Child and Adolescent Services Association (CASA)
- Capital Health Authority- Physicians Group

30th Calgary

- Canadian Independent Medical Clinics Association
- Heart & Stroke Foundation
- Alberta Long Term Care Association
- Arthritis Society
- Calgary Health Region
- Members of the public

Appendix B

Total responses were as follows:

Method of consultation	Total
Meeting participants	429
E-mails and letters	2422
Alberta Connects	1634
Web-based Feedback	342
Phone calls	985
Service Alberta	1033
TOTAL	6845